



08-15-08

IFW#

PTO/SB/21 (01-08)

Approved for use through 3/31/2008. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/821485
	Filing Date	April 9, 2004
	First Named Inventor	Lawrence A. Booth, Jr.
	Art Unit	2628
	Examiner Name	Joni Hsu
Total Number of Pages in This Submission	Attorney Docket Number	MP1510

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return postcard		
<table border="1"><tr><td>Remarks</td><td>The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750.</td></tr></table>			Remarks	The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750.
Remarks	The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750.			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Harness, Dickey & Pierce, P.L.C.		
Signature			
Printed name	Michael D. Wiggins		
Date	August 14, 2008	Reg. No.	34,754

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Mary Aiello	Express Mail Label No.	EM 184 988 460 US (8/14/2008)
Signature		Date	August 14, 2008

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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EM 184 988 460 US



FEE TRANSMITTAL for FY 2008

Effective 2/8/2006. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 120

Complete if Known

Application Number

Filing Date

First Named Inventor

Examiner Name

Art Unit

Attorney Docket No.

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None
Order

☒ Deposit Account:

Deposit
Account
Number

08-0750

Deposit
Account
Name

Harness, Dickey & Pierce, P.L.C.

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Credit any overpayments
☐ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee
to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1011	310	2011	155	Utility filing fee	
1012	210	2012	105	Design filing fee	
1013	210	2013	105	Plant filing fee	
1014	310	2014	155	Reissue filing fee	
1005	210	2005	105	Provisional filing fee	
SUBTOTAL (1)					(\$) 0

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

			Extra Claims		Fee from below		Fee Paid
Total Claims		**	= 0	X		=	0
Independent Claims		**	= 0	X		=	0
Multiple Dependent						=	0

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	50	2202	25	Claims in excess of 20	
1201	210	2201	105	Independent claims in excess of 3	
1203	370	2203	185	Multiple dependent claim, if not paid	
1204	210	2204	105	** Reissue independent claims over original patent	
1205	50	2205	25	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					(\$) 0

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	120	2251	60	Extension for reply within first month	120
1252	460	2252	230	Extension for reply within second month	
1253	1,050	2253	525	Extension for reply within third month	
1254	1,640	2254	820	Extension for reply within fourth month	
1255	2,230	2255	1,115	Extension for reply within fifth month	
1401	510	2401	255	Notice of Appeal	
1402	510	2402	255	Filing a brief in support of an appeal	
1403	1,030	2403	515	Request for oral hearing	
1452	510	2452	255	Petition to revive - unavoidable	
1453	1,540	2453	770	Petition to revive - unintentional	
1462	400	1462	400	Petition fee under 37 CFR 1.17(f)	
1463	200	1463	200	Petition fee under 37 CFR 1.17(g)	
1464	130	1464	130	Petition fee under 37 CFR 1.17(h)	
1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	810	2809	405	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	810	2810	405	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	810	2801	405	Request for Continued Examination (RCE)	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$120)

4. SEARCH/EXAMINATION FEES

1111	510	2111	255	Utility Search Fee	
1112	100	2112	50	Design Search Fee	
1113	310	2113	155	Plant Search Fee	
1114	510	2114	255	Reissue Search Fee	
1311	210	2311	105	Utility Examination Fee	
1312	130	2312	65	Design Examination Fee	
1313	160	2313	80	Plant Examination Fee	
1314	620	2314	310	Reissue Examination Fee	
SUBTOTAL (4)					(\$) 0

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Michael D. Wiggins	Registration No. (Attorney/Agent)	34,754	Telephone	(248) 641-1600
Signature		Date	August 14, 2008		

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SUBTOTAL (1)

(\$0)

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	Extra Claims	Fee from below	Fee Paid
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Independent Claims	0		0
Multiple Dependent			0

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SUBTOTAL (2)

(\$0)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

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Large Entity Small Entity

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1312	130	2312	65	Design Examination Fee	
1313	160	2313	80	Plant Examination Fee	
1314	620	2314	310	Reissue Examination Fee	

SUBTOTAL (4) (\$0)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Michael D. Wiggins	Registration No. (Attorney/Agent)	34,754	Telephone	(248) 641-1600
Signature		Date	August 14, 2008		

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